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The British Association for Behavioural Psychotherapy was founded in 1972. It is a multidisciplinary organisation and full membership is restricted to members of the helping professions – psychiatrists, psychologists, social workers, nurses, probation officers, teachers, etc.

Objects of the Association

(a) To promote the advancement of the theory and practice of behavioural psychotherapy, in particular the application of experimental methodology and learning techniques to the assessment and modification of maladaptive behaviour in a wide variety of settings.

(b) To provide a forum for discussion of matters relevant to behavioural psychotherapy.

(c) To disseminate information about and provide training for behavioural psychotherapy, by organising conferences, courses, and workshops or by any other means.

(d) To print, publish and circulate newsletters, reports and other publications containing articles, information and news relating to behavioural psychotherapy.

(e) To make representation to, and to establish and maintain liaison with, public and professional bodies.

(f) To foster and promote research into behavioural psychotherapy, and related matters.

(g) To establish and organise, regional or specialist branches in order to promote the objects fo the Association and to provide a service to members.

(h) To encourage and assist in training in behavioural psychotherapy.

(i) To study matters of concern to behaviour therapists and to take such action as is consistent with the objects of the Association and in the public interest.

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WHAT SORT OF COGNITIVE PROCESSES ARE INVOLVED IN COGNITIVE BEHAVIOUR THERAPY? BEYOND MAHONEY.

Fraser N. Watts. Kings College Hospital

Mahoney's recent book, Cognition and Behaviour Modification (1974), has produced some fierce interchanges in the pages of this journal. To me, the surprising feature of the controversy is that it has frowned on Mahoney's arguments about the adequacy of radical behaviourism. I had imagined that the philosophical assumptions of radical behaviourism had long ago been shown to be untenable. However, I do not wish to join in this discussion, or to try and improve on the arguments of Mahoney and Marzillier's (1976) defence of them.

To me, the really interesting questions raised by Mahoney's book are to do with the nature of cognitive behaviour therapy. What relationship does it have to general cognitive psychology itself? What kind of cognitive processes is it concerned with? How should these be formulated and investigated? I find Mahoney less helpful than I could wish on such questions. However, he has set the stage for a discussion of them so well, that it would be a shame if the opportunity of debating them were lost.

At present cognitive behaviour therapy seems to be developing in a rather haphazard and pragmatic fashion with all too little attention being paid to the nature of the processes it is dealing with. It is understandable that it should come to birth in this way, but the time has come for it to take itself more seriously as an applied science. This, as Shapiro (1970) has reminded us, will involve a dialogue between the basic and applied science, which could be of mutual benefit. Some of the limitations of current cognitive psychology may be clarified by a discussion of its therapeutic application.

Mahoney's treatment of cognitive behaviour therapy is organised around the various difficult 'models' under which the treatment techniques he discusses are classified. These are generically called "mediational models" to distinguish them from the non-mediational model of radical behaviourism. Under this heading he distinguishes, firstly, the covert conditioning model. The treatment techniques he considers here are imaginal